



## **Concerned Citizens of Whitesboro, Inc. Scholarship Program**

**Financial Assistance** – Students Currently Enrolled in a College/University

### **Qualifications:**

To be eligible for financial assistance from our scholarship program, you must be currently enrolled in a college/university with a grade point average of at least 2.5.

### **Instructions:**

Complete the Scholarship Application.

Submit current semester grades.

Submit a letter of request stating why you deserve to receive a Scholarship. Letter should be typed and should not exceed one page.

Complete final page for any additional information you would like to be considered.

Submit completed application to the address listed below.

### **Support Material:**

Application and supporting materials are to be mailed to Concerned Citizens of Whitesboro, Inc. or given to a member of CCW, Inc. The material can also be turned in to the office of the Martin Luther King, Jr. Center in Whitesboro, NJ.

### **Important Information:**

Please be advised that any application submitted with the required material will not be considered by the scholarship committee. All applicants will be notified by letter of their eligibility and the results of their application.

For more information, contact:

Concerned Citizens of Whitesboro, Inc.

PO Box 412

Whitesboro, NJ 08252

or

Email: [concernedcitizensofwhitesboro@gmail.com](mailto:concernedcitizensofwhitesboro@gmail.com)

Subject: Scholarships



Concerned Citizens of Whitesboro, Inc.  
Scholarship Program

Financial Assistance – Students Currently Enrolled in a College/University  
**Continuous Assistance Scholarship Application**

**PERSONAL DATE (Please print or type)**

Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Parent/Guardian's Address (if different than above): \_\_\_\_\_

\_\_\_\_\_

**EDUCATIONAL INFORMATION**

Current College/School: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Enrolled Date: \_\_\_\_\_ GPA: \_\_\_\_\_ Class Rank: \_\_\_\_\_

Major/Area of Study: \_\_\_\_\_

Anticipated Graduation Date: \_\_\_\_\_

List any scholarships received: \_\_\_\_\_ \$ Amount: \_\_\_\_\_

\_\_\_\_\_ \$ Amount: \_\_\_\_\_

\_\_\_\_\_ \$ Amount: \_\_\_\_\_

Other scholarships and/or financial aide expected: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

